UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D
OCT 1 ! 20NOPICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (| | check if this is an amendment and name has changed, and indicate change.)

OMB APPROVAL

OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response 1.00

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

| | other (please specify):

[] Actual [x] Estimated

[DE]

Filing Under (Check box(es) that apply): Rule 504 [Rule 505 X Rule 506 Sec	tion 4(6) [] ULOE	HATM THE CAME AND AND AND ADDRESS OF THE CAME AND ADDR		
Type of Filing: [X New Filing Amendment				
A. BASIC IDENTIFICATION DATA	L			
1. Enter the information requested about the issuer		07080128		
Name of Issuer ([] check if this is an amendment and name has changed, and indicat Fortes Financial, Inc.	e change.)	•		
Address of Executive Offices (Number and Street, City, State, Zip Code) 23046 Avenedia de la Carlota, Suite 600, Laguna Hills, CA 92653	Telephone Number ((949) 588-5769	(Including Area Code)		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Same	(Including Area Code)		
Brief Description of Business		Albo.		

Month

[1][0]

Year

(Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

0 ||6|

GENERAL INSTRUCTIONS

Federal:

Mortgage Company

Type of Business Organization [x | corporation

I business trust

Jurisdiction of Incorporation or Organization:

Actual or Estimated Date of Incorporation or Organization:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR230.501 et seq. or 15 U.S.C. 77d(6).

] limited partnership, already formed

limited partnership, to be formed

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer, and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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<i>^</i>	DA							157	

- Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: [] Promote	[X] Beneficial Owner	[X] Executive Officer	[x] Director	[]	General and/or Managing Partner				
Full Name (Last name first, if individual)			·						
Peter J. Levasseur									
Business or Residence Address (Number	and Street, City, State, Zip	Code)							
310 Via Promsa, San Clemente, CA 92673	i								
Check Box(es) that Apply: []Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[]	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Janice Ibey									
Business or Residence Address (Number	and Street, City, State, Zip	Code)							
3041 Java Road, Cosa Mesa, CA 92626									
Check Box(es) that Apply: [X] Promot	er [X] Beneficial Owner	[] Executive Officer	[X] Director	[]	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Cagan, Laird Q.									
Business or Residence Address (Number	and Street, City, State, Zip	Code)		· · · · · · · · · · · · · · · · · · ·					
10600 N De Anza Blvd., Suite 250, Cupe	rtino, CA 95014								
Check Box(es) that Apply: [X] Promo	er [] Beneficial Owner	[] Executive Officer	[] Director	[]	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Chadbourn Securities, Inc.									
Business or Residence Address (Number	and Street, City, State, Zip	Code)			•				
9191 R.G. Skinner Pkwy, Suite 501, Jac	ksonville, FL 32256								
Check Box(es) that Apply: [] Promote	[X] Beneficial Owner	r [] Executive Officer	[] Director	[]	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Eric A. McAfee (Held by: McAfee Capit	al, LLC)								
Business or Residence Address (Number 10600 N De Anza Blvd., Suite 250, Cupe		Code)							
Check Box(es) that Apply: [] Promote	[] Beneficial Owner	[] Executive Officer	[] Director	[]	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									

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1. Has the	issuer sold,	or does the	e issuer inte	nd to sell, t	o non-accre	dited inves	tors in this o	ffering?				Yes No [] [X]
Answer also in Appendix, Column 2, if filing under ULOE												
2. What is the minimum investment that will be accepted from any individual?										\$ 10,000		
Does the offering permit joint ownership of a single unit?										Yes No[X]		
 Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 												
Full Name (Chadbourr	•	,	vidual)	-								
Business or 1050 Rivers					, State, Zip	Code)						
Name of As	ssociated Br	oker or De	aler									
States in Wi												[] All States
[AL] [L] [MT] [RI]	[AK] [N] [NE] [SC]	[IA] [NV] [SD]	[AR] [KS] [NH] [TN]	CA [KY] NJ [TX]	CO LA [NM] UT]	CT [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	FL MI OH (WV)	GA [MN] [OK] WI	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Cagan, La		first, if indi	vidual)									-
Business or 10600 N. D					, State, Zip	Code)						
Name of As Chadbourn			aler	, ,,								
States in WI (Check												[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[IA] [NV] [SD]	[AR] [KS] [NH] [TN]	CA [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	CTI [ME] [NY] [VT]	(DE) (MD) (NC) (VA)	[DC] [MA] [ND] [WA]	FLI MII OHI [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]
Full Name (Last name f	îrst, if indi	vidual)									
Business or	Residence A	Address (N	umber and	Street, City	, State, Zip	Code)					•	
Name of As	sociated Bro	oker or Dea	aler							· <u>·</u>		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)									[] All States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate Offering Price	Amount Already Sold
	Type of Security	One mg r nee	5010
	Debt	\$	\$
	Equity	\$_2,000,000	\$ _1,000,000
	[] Common [X] Preferred		
	Convertible Securities (including warrants) Up to 266,666 warrants exercisable at \$0.75 per share, and common stock issuable upon exercise thereof	\$_200,000	\$100,000
	Partnership Interests	\$	\$
	Other	\$	
	Total	\$_2,200,000	\$_1,100,000
•	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	\$ 1,000,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities of this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		
	Total		\$S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		3
	Transfer Agent's Fees	[]	\$
	Printing and Engraving Costs	[]	\$
	Legal Fees	[x	\$ 15,000
	Accounting Fees	[]	\$
	Engineering Fees	[]	\$
	Sales Commissions (specify finders' fees separately) –8%	[X	J \$_160,000
	Other Expenses (identify) 1 % unallocated expense	[X] \$20,000
		•	

C. OFFERING PRICE, N	UMBER OF INVESTORS, EXP	ENSE	S AND USE OF PE	COCEE)8
 b. Enter the difference between the aggreg Part C - Question 1 and total expenses furn 4.a. This difference is the "adjusted gross p 	ate offering price given in response to ished in response to Part C - Question roceeds to the issuer."				\$_2,005,000
5. Indicate below the amount of the adjusted proposed to be used for each of the purpourpose is not known, furnish an estimate estimate. The total of payments listed must the issuer set forth in response to Part C - Q	t equal the adjusted gross proceeds to				
			Payments to Officers, Directors, & Affiliates		Payments To Others
Salaries and fees	······	[]	\$. []	\$
Purchase of real estate		[]	\$. []	\$
Purchase, rental or leasing and installati	on of machinery and equipment	[]	\$. []	\$
Construction or leasing of plant building	gs and facilities	[]	\$. []	\$
Acquisition of other business (including in this offering that may be used in exchof another issuer pursuant to a merger).	ange for the assets or securities	[]	\$. []	\$
Repayment of indebtedness		[]	\$. []	\$
Working capital			\$	[x]	\$_1,005,000
Other(specify): Collateral for warehouse	e lines of credit	[]	\$	[x]	\$_1,000,000
		[]	\$. []	\$
Column Totals			\$. []	\$
Total Payments Listed (column totals ac	lded)				\$ 2,005,000
	D. FEDERAL SIGNATU	JRE			
The issuer has duly caused this notice to be signs signature constitutes an undertaking by the issuer information furnished by the issuer to any non-accr	ed by the undersigned duly authorize to furnish to the U.S. Securities and	d perso	on. If this notice is file ange Commission, upon f Rule 502.	ed under on written	Rule 505, the following request of its staff, the
Issuer (Print or Type)	Signature		Date		· · · · · · · · · · · · · · · · · · ·
Fortes Financial, Inc.	With		September 25	, 2007	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	•	· · · · · · · · · · · · · · · · · · ·		
Peter J. Levasseur	er				

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ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).